

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No.	AMN-006-003		Total Pages	
		First named Inventor or Application Identifier			Shozo KOYAMA	
		Title of Invention		METHOD FOR PRODUCING AN ANTIGENIC SUBSTANCE AND ANTIBODY		
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.				ADDRESS TO: Commissioner for Patents Box Patent Application Alexandria, VA 22313-1450		
1. <input checked="" type="checkbox"/> Fee Transmittal Form 2. <input checked="" type="checkbox"/> Specification [Total Pages <u>80</u>] - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Formal Drawings (35 USC 113) (Total Sheets <u>13</u>) 4. <input checked="" type="checkbox"/> Oath or Declaration [Total pages <u>1</u>] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below] i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 5. <input checked="" type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.				6. <input type="checkbox"/> Microfiche Computer Program (Appendix) 7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 8. <input type="checkbox"/> Assignment papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (When there is an assignee) <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS) /PTO-1449 <input type="checkbox"/> Copies of IDS Citations (* docs) 12. <input checked="" type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) 14. <input checked="" type="checkbox"/> Assertion to Entitlement to Small Entity Status <input checked="" type="checkbox"/> Assertion filed in prior application, status still proper and desired 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Priority of application No. 9-028295 filed on January 29, 1997, in Japan is claimed under 35 USC 119. <input checked="" type="checkbox"/> The certified copy has been filed in prior application Serial No. 09/355,642. 16. <input type="checkbox"/> Other: <input type="checkbox"/> Copy of Notice of Recordation of Assignment Document <input type="checkbox"/> Request for Change of Corresponding Address		
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in part (CIP) <div style="text-align: right;">of prior application No.: <u>09/ 881,664</u></div>						
18. CORRESPONDENCE ADDRESS						
<input checked="" type="checkbox"/> Customer Number or Bar Code Label <u>020374</u> or <input type="checkbox"/> Correspondence address below						
NAME		KUBOVCIK & KUBOVCIK				
ADDRESS		900 17th Street, N.W.				
CITY	Washington	STATE	DC	ZIP CODE	20006	
FILING DATE	February 26, 2004	TEL	202-887-9023	FAX	202-887-9093	

022604

01919 U.S. PTO

FEE TRANSMITTAL

Note: Effective October 1, 2003

Application Number	Not Assigned
Filing Date	February 26, 2004
First Named Inventor	Shozo KOYAMA
Group Art Unit	Not Assigned
Examiner Name	Not Assigned
Attorney Docket Number	AMN-006-003


CLAIMS AS FILED-PART 1			SMALL ENTITY		OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE	RATE	FEE
BASIC FEE (37 CFR 1.16 (a))				\$385.00		\$770.00
TOTAL CLAIMS (37 CFR 1.16 (c))	18 - 20 =		\$9.00		\$18.00	\$0.00
INDEPENDENT CLAIMS (37 CFR 1.16 (B))	5 - 3 =	2	\$43.00	\$86.00	\$86.00	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16 (d))			\$145.00		\$290.00	
			SUB TOTAL	\$471.00	SUB TOTAL	
SURCHARGE-LATE FILING FEE OR DECLARATION			\$65.00		\$130.00	
RECORDING ASSIGNMENT			\$40.00		\$40.00	
TOTAL				\$471.00		\$0.00

METHOD OF PAYMENT (check one)1. ☒ The commissioner is hereby authorized to credit overpayments or charge insufficiencies to:

DEPOSIT ACCOUNT No. 111833

DEPOSIT ACCOUNT NAME KUBOVCIK & KUBOVCIK

2. ☒ Payment Enclosed:☒ Check (# 5924 for \$471.00)☐ Money Order☐ Other**SIGNATURE OF ATTORNEY, OR AGENT**

NAME	Keiko Tanaka Kubovcik	REGISTRATION No.	40,428
SIGNATURE		ADDRESS	KUBOVCIK & KUBOVCIK 900 17th Street, N.W. Washington, D.C. 20006
		TELEPHONE	202-887-9023
DATE	February 26, 2004	FAX	202-887-9093

KTK/cfm